**Replenishment Item Bank &**

**Short Form Version of**

**Physical Function & Behavioral Health FAB (Survey 2)**

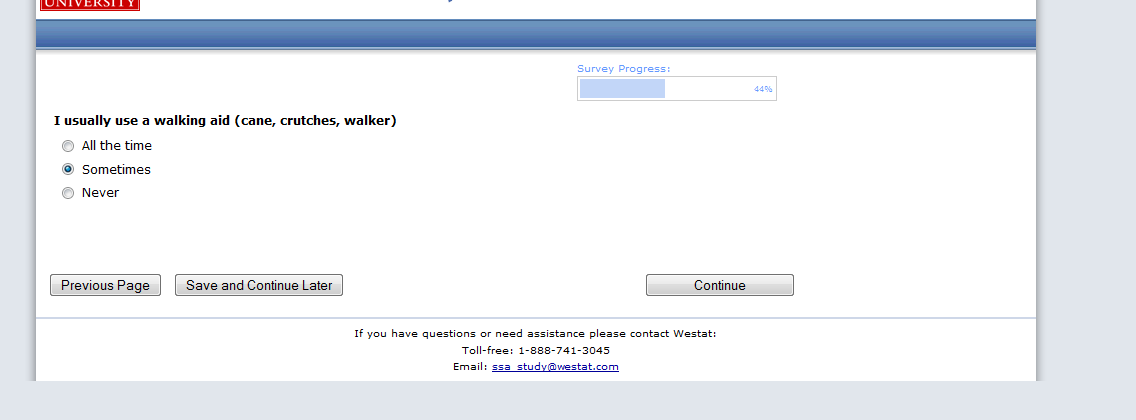
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The following items represent a comprehensive list of every question for Survey #2 (Both for Calibration with SSDI Claimants and the Normative Sample).

This screenshot would be the format the respondent would see (if choosing to self administer, i.e. not request the answers entered by a telephone interviewer) for each selected question. If granted OMB clearance, the OMB Control number, expiration date and required language will be written into the software so that it appears on the introductory screen for every respondent. For those participants opting for telephone interviewer administration, they will be read the contents of the OMB control box during the pre-screening for each survey.



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| **Physical Function Replenishment Items** | | | |
| **Primary Domain** | **Item Stem** | **Item Content** | **Item Response Scale** |
| changing and maintaining body position | Are you able | to stand in the shower to wash your hair? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| changing and maintaining body position | Are you able | to get in and out of the bathtub? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| Changing and maintaining body position | Are you able | to reach into a cabinet from a step ladder or stool? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| changing and maintaining body position | Are you able | to bend down to use a dust pan? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| changing and maintaining body position | Are you able | to lean forward to brush your teeth over a sink? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| changing and maintaining body position | Are you able | to look over your shoulder to back up in a car? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| changing and maintaining body position | Are you able | to look under your bed or couch? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| changing and maintaining body position | Are you able | to unload a washing machine? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| changing and maintaining body position | Are you able | to kneel down to tie a shoe? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| changing and maintaining body position | Are you able | to bend to look under a car? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| changing and maintaining body position | Are you able | to sit in a car for more than 2 hours? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| changing and maintaining body position | Are you able | to crawl under a table to pick up something you dropped? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| Upper Body Function | Are you able | to clean a floor using a mop? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper body function | Are you able | to pull open a dresser drawer? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| Upper body function | Are you able | to pull open a low cabinet door? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| Upper Body function | Are you able | to push your chair back to get up from sitting at a table? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper body function | Are you able | pull a small suitcase by the handle? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper body function | Are you able | to lift a 2 liter soda bottle from the floor to a high shelf? A soda bottle=3.5lbs/1.5kg | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper body function | Are you able | to clean out a closet? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper body function | Are you able | to lift a heavy box from the floor to table height? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper body function | Are you able | to carry your jacket? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper body function | Are you able | to lift a package weighing 10 lbs? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper body function | Are you able | to carry a full kitchen trash bag outside? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper body function | Are you able | to lift a 12 pack of soda cans from a grocery shelf to a grocery cart? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper body function | Are you able | to lift a full, small (carry-on size) suitcase from the floor to a high shelf?  A full carry-on suitcase weighs 20 pounds/8 kg. | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper body function | Are you able | to lift a large heavy box from the floor to a high shelf? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| Upper Body Function | Are you able | to unload a full grocery cart into a car? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper body function | Are you able | to unload the dishwasher? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper body function | Are you able | to move a sofa to clean under it? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper body function | Are you able | to wipe down a kitchen counter? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper body function | Are you able | to reach into a mailbox? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper body function | Are you able | to make a bed? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| Upper extremity fine motor | Are you able | to grip the steering wheel during a long drive? For example a couple of hours. | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper extremity fine motor | Are you able | to change a light bulb overhead? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| Upper extremity fine motor | Are you able | to chop or slice vegetables for a large meal? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper extremity fine motor | Are you able | to hold an umbrella? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper extremity fine motor | Are you able | to use tweezers? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper extremity fine motor | Are you able | to use a nut cracker? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper extremity fine motor | Are you able | to remove a dollar bill from your wallet? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper extremity fine motor | Are you able | to put coins into a slot? For example a vending machine. | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper extremity fine motor | Are you able | to push the correct buttons on a remote control? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper extremity fine motor | Are you able | to type a text message on a cell/mobile phone? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper extremity fine motor | Are you able | to use a mouse to select what you need on a computer screen? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper extremity fine motor | Are you able | to close a zip lock bag? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper extremity fine motor | Are you able | to close a twist tie on a bag of bread? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper extremity fine motor | Are you able | to peel the sticker off something you bought? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper extremity fine motor | Are you able | to open a bottle of soda? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper extremity fine motor | Are you able | to insert a plug into an electric outlet? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper extremity fine motor | Are you able | to use a chip clip to close a bag? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper extremity fine motor | Are you able | to turn a dial? For example on a stove. | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper extremity fine motor | Are you able | to use the trigger on a spray bottle? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper extremity fine motor | Are you able | to type an email? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper extremity fine motor | Are you able | to button your shirt? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| upper extremity fine motor | Are you able | to put on a watch or bracelet? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| Whole body mobility | Are you able | to walk a short distance? For example from a parking lot into a grocery store. | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| Whole body mobility | Are you able | to walk a short distance using your walking aid? For example from a parking lot into a grocery store. | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| whole body mobility | Are you able | to walk the aisles of a grocery store using a shopping cart? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| Whole body mobility | Are you able | to walk from store to store while shopping ? For example in a shopping mall. | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| Whole body mobility | Are you able | to walk from store to while shopping using your walking aid? For example in a shopping mall. | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| whole body mobility | Are you able | walk up a flight of stairs without a handrail? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| whole body mobility | Are you able | to walk to the bathroom? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |
| whole body mobility | Are you able | to walk to the bathroom using your walking aid? | Yes, without difficulty   Yes, with a little difficulty   Yes, with some difficulty   Yes, with a lot of difficulty   Unable to do   I don't know |

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| **Behavioral Health Replenishment Items** | | | |
| **Primary Domain** | **Item Stem** | **Item Content** | **Item Response Scale** |
| Mood & Emotions | Please specify your level of agreement: | I worry a lot about my health. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Mood & Emotions | Please specify your level of agreement: | I often think that something is really wrong with my health. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Mood & Emotions | Please specify your level of agreement: | I seem to worry about my health a lot. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Mood & Emotions | Please specify your level of agreement: | People say I show no emotion | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | I often get upset with the people around me. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | It doesn’t take much to set me off | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | People often tell me my behavior is inappropriate. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behaviroal Control | Please specify your level of agreement: | I often get angry when I'm told how to do something. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | I can handle stressful situations. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | Usually, I can do no wrong. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | Even when I do something very carefully I feel that it is not quite right. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | I can see things that others can't. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | I can hear things that others can't. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | I do whatever I want, no matter what others think. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | I have difficulty following the rules. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | I find that I have a hard time sitting still when I need to. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | I tend to do things very slowly. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | I am always watching or on guard for threats. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | I often get angry when I'm told what to do. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | When I am stressed, I find myself losing control. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | I am often overly alert. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | Sometimes I do things to hurt myself. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | Often my thoughts go a mile a minute. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | Sometimes I feel on top of the world for no reason. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | I like to be the center of attention. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | I have difficulty calming down. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | People tell me that I am too energetic. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | I often feel that I have been given special powers. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | My mind is always racing. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | I get behind in my work or daily activities because I do things over and over again. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | The same thoughts keep running through my head | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self-Efficacy | Please specify your level of agreement: | I am the person most responsible for my own well being. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self-Efficacy | Please specify your level of agreement: | I am able to get the emotional support I need. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self-Efficacy | Please specify your level of agreement: | I usually accomplish what I set out to do. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self-Efficacy | Please specify your level of agreement: | I ask for help when I need to. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self-Efficacy | Please specify your level of agreement: | I have a desire to succeed. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self-Efficacy | Please specify your level of agreement: | I have goals in life that I want to reach | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self-Efficacy | Please specify your level of agreement: | Doing things well is very important to me. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self-Efficacy | Please specify your level of agreement: | I am confident that I can get things done in my day-to-day life. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self-Efficacy | Please specify your level of agreement: | I don’t mind when people give me advice. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Social Interactions | Please specify your level of agreement: | I make an effort to get to know other people. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Social Interactions | Please specify your level of agreement: | I always try to get along with others. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Social Interactions | Please specify your level of agreement: | I work well in a group. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Social Interactions | Please specify your level of agreement: | I often have difficulty dealing with people. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Social Interactions | Please specify your level of agreement: | I respect other people. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Social Interactions | Please specify your level of agreement: | People have told me that sometimes I act strange. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Social Interactions | Please specify your level of agreement: | I don't feel the same things that others around me feel. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Social Interactions | Please specify your level of agreement: | I am polite to others. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Social Interactions | Please specify your level of agreement: | I often avoid going to crowded places. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Social Interactions | Please specify your level of agreement: | I feel distant or cut off from people. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Social Interactions | Please specify your level of agreement: | I don't have much interest in being with other people. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Social Interactions | Please specify your level of agreement: | I am afraid of being with other people. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Social Interactions | Please specify your level of agreement: | I am able to adjust to other people's ways. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Social Interactions | Please specify your level of agreement: | I respect other people's privacy. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Social Interactions | Please specify your level of agreement: | I respect other people's space. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Social Interactions | Please specify your level of agreement: | I respect other people's property. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Social Interactions | Please specify your level of agreement: | I have a hard time accepting criticism. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Social Interactions | Please specify your level of agreement: | I often say things that upset others. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Social Interactions | Please specify your level of agreement: | I difficulty letting people know how I feel. | Strongly agree Agree Disagree Strongly disagree I don't know |

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| **Short Form Version, Physical Function** | | | | | | |
| Changing and Maintaing Body Position | | Are you able | | to get in and out of bed?  Base response on the most difficult part of the activity. | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Changing and Maintaing Body Position | | Are you able | | to get into and out of a car?  Please base your response on the most difficult part of this activity. | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Changing and Maintaing Body Position | | Are you able | | to sit on a stool without back support? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Changing and Maintaing Body Position | | Are you able | | to get up off the floor from lying on your back? You can use a chair or other object to get up. | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Changing and Maintaing Body Position | | Are you able | | to get down on the floor? For example moving from standing or your wheelchair to kneel or sit on the floor | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Changing and Maintaing Body Position | | Are you able | | to get into and out of a kneeling position? Please base your response on the most difficult part of the activity. | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Changing and Maintaing Body Position | | Are you able | | to get in and out of a squatting position? Please base your response on the most difficult part of the activity. | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Changing and Maintaing Body Position | | Are you able | | to climb 2 or 3 steps up a step ladder? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Changing and Maintaing Body Position | | Are you able | | to work at floor level? For example changing the face plate on an electric outlet. | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Changing and Maintaing Body Position | | Are you able | | to bend over to pick up coins that are scattered on the floor? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Changing and Maintaing Body Position | | Are you able | | to stand up from a low, soft couch?  Without holding on to anything. | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Changing and Maintaing Body Position | | Are you able | | to kneel on the floor for a long time? For example when cleaning the bathtub or playing with kids or pet.   3-5 minutes | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Changing and Maintaing Body Position | | Are you able | | to go down one flight of stairs using a handrail?   A flight of stairs is 12-15 steps. | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Upper Body Function | | Are you able | | to carry a full paper grocery bag for 30 feet? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Upper Body Function | | Are you able | | to lift a full small (carry-on size) suitcase from the floor to table height?  A full carry-on suitcase weighs 20 pounds/8 kg. | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Upper Body Function | | Are you able | | to push a vacuum? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Upper Body Function | | Are you able | | to pick up a kitchen chair and move it, in order to clean? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Upper Body Function | | Are you able | | to push a full grocery cart? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Upper Body Function | | Are you able | | to carry a full laundry basket for 30 feet? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Upper Body Function | | Are you able | | to work overhead for 20 minutes? For example organizing a high shelf in a closet. | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Upper Body Function | | Are you able | | to lift a full 2 liter soda bottle from table height to a high shelf?  A 2 liter soda bottle= 3.5 lbs/1.5 kg. | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Upper Body Function | | Are you able | | to lift a full large (check-in size) suitcase from the floor to table height? A full large suitcase weighs 40-50 pounds/18-23 kg | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Upper Body Function | | Are you able | | to pull open a heavy door? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Upper Body Function | | Are you able | | to carry a full small (carry-on size) suitcase for 30 feet?  A full carry-on suitcase weighs 20 pounds/8 kg. | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Upper Body Function | | Are you able | | to carry a full laundry basket up a flight of stairs? A flight of stairs is 12-15 steps. | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Upper Body Function | | Are you able | | do yard work for 2 hours? For example plant shrubs or a garden. With occasional rest but continuous work. | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Upper Extremity Fine Motor | | Are you able | | to buckle a strap For example on a bicycle helmet, child's car seat or backpack. | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Upper Extremity Fine Motor | | Are you able | | to write for 20 minutes? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Upper Extremity Fine Motor | | Are you able | | to tighten screws by hand with a screwdriver? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Upper Extremity Fine Motor | | Are you able | | to turn a key in a door lock? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Upper Extremity Fine Motor | | Are you able | | to put batteries in a flashlight, or remote control for your television? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Upper Extremity Fine Motor | | Are you able | | to turn faucets on and off? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Upper Extremity Fine Motor | | Are you able | | to remove wrappings from small objects? For example like removing the packaging from a pack of batteries. | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Upper Extremity Fine Motor | | Are you able | | to reach behind you to get your seatbelt? A shoulder harness seatbelt. | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Upper Extremity Fine Motor | | Are you able | | to pick up coins from a table top? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Upper Extremity Fine Motor | | Are you able | | to open childproof medicine bottles or jars? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Upper Extremity Fine Motor | | Are you able | | to a can with a hand can opener? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Upper Extremity Fine Motor | | Are you able | | to use a hammer to pound a nail? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Upper Extremity Fine Motor | | Are you able | | to pick out one key from group of keys? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| Upper Extremity Fine Motor | | Are you able | | to open previously opened jars? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know |
| **Please select the response that best describes how you usually get around:** | | | | | | |
| I usually use a walking aid (cane, crutches, or walker): | | | | | | All the time Sometimes Never |
| I usually use a manual wheelchair or power wheelchair to get around: | | | | | | All the time; I never walk Sometimes  Never |
| Whole Body Mobility | Are you able | | to stand on your feet for one hour? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know | |
| Whole Body Mobility | Are you able | | to stand on your feet for one hour using your walking aid? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know | |
| Whole Body Mobility | Are you able | | to walk a mile without resting? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know | |
| Whole Body Mobility | Are you able | | to walk a mile without resting using your walking aid? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know | |
| Whole Body Mobility | Are you able | | to walk up a steep slope? For example on a hill. | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know | |
| Whole Body Mobility | Are you able | | to walk up a steep slope using your walking aid? For example on a hill. | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know | |
| Whole Body Mobility | Are you able | | to walk on uneven surfaces? For example on grass, dirt road or sidewalk. | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know | |
| Whole Body Mobility | Are you able | | walk on uneven surfaces using your walking aid? For example on grass, dirt road or sidewalk. | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know | |
| Whole Body Mobility | Are you able | | to walk quickly indoors? For example to answer the telephone or the front door. | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know | |
| Whole Body Mobility | Are you able | | to run a short distance, such as to catch a bus? A short distance is roughly half a block or about 15-20 yards. | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know | |
| Whole Body Mobility | Are you able | | to walk at least 15 minutes? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know | |
| Whole Body Mobility | Are you able | | to walk at least 15 minutes using your walking aid? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know | |
| Whole Body Mobility | Are you able | | to remain on your feet for at least 20 minutes? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know | |
| Whole Body Mobility | Are you able | | to remain on your feet for at least 20 minutes using your walking aid? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know | |
| Whole Body Mobility | Are you able | | to cross the road at a 4-lane traffic light with curbs using your walking aid? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know | |
| Whole Body Mobility | Are you able | | to walk around one floor of your home without tripping or losing your balance? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know | |
| Whole Body Mobility | Are you able | | to run fast for 2 minutes? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know | |
| Wheelchair | Are you able | | to get in and out of your wheelchair? Please base your response on the most difficult part of this activity. | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know | |
| Wheelchair | Are you able | | to move around one floor of your home in your wheelchair without bumping into things? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know | |
| Wheelchair | Are you able | | to move your wheelchair for at least 15 minutes? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know | |
| Wheelchair | Are you able | | to move around in the bathroom, including getting on and off the toilet from your wheelchair? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know | |
| Wheelchair | Are you able | | to cross the street at a traffic light in your wheelchair? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know | |
| Wheelchair | Are you able | | to get in and out of a car from your wheelchair?  Please consider a sedan sized car when considering your answer. | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know | |
| Wheelchair | Are you able | | to get into and out of a truck, bus, shuttle van, or sport utility vehicle from your wheelchair? | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know | |
| Wheelchair | Are you able | | to move your wheelchair up and down curbs?  Please base your response on the most difficult part of this activity. | | Yes, without difficulty Yes, with a little difficulty Yes, with some difficulty Yes, with a lot of difficulty Unable to do I don't know | |

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| **Short Form Version, Behavioral Health** | | | |
| **Primary Domain** | **Item Stem** | **Item Content** | **Item Response Scale** |
| Social Interactions | In the past 7 days, | I could keep up with my family responsibilities. | Never Rarely Sometimes Often Always |
| Social Interactions | In the past 7 days, | I was able to do all the family activities that I was expected to do. | Never Rarely Sometimes Often Always |
| Social Interactions | In the past 7 days, | I could keep up with my social commitments. Social commitments meaning plans you’ve made with others. | Never Rarely Sometimes Often Always |
| Social Interactions | In the past 7 days, | I look forward with enjoyment to upcoming events. | Never Rarely Sometimes Often Always |
| Social Interaction | Please specify your level of agreement: | I feel that I'm an important part of the community where I live. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Social Interactions | In the past 7 days, | I was able to do all of my usual work (including work at home). | Never Rarely Sometimes Often Always |
| Mood and Emotions | In the past 7 days, | it was hard to keep up enthusiasm to get things done. | Never Rarely Sometimes Often Always |
| Mood and Emotions | In the past 7 days, | I felt that nothing was interesting. | Never Rarely Sometimes Often Always |
| Mood and Emotions | In the past 7 days, | I was preoccupied with my worries. | Never Rarely Sometimes Often Always |
| Mood and Emotions | In the past 7 days, | I had sudden feelings of panic. | Never Rarely Sometimes Often Always |
| Mood and Emotions | In the past 7 days, | I felt nervous when my normal routine was disturbed. | Never Rarely Sometimes Often Always |
| Mood and Emotions | In the past 7 days, | I felt that nothing could cheer me up. | Never Rarely Sometimes Often Always |
| Mood and Emotions | In the past 7 days, | I was afraid of what the future holds for me. | Never Rarely Sometimes Often Always |
| Mood and Emotions | In the past 7 days, | I had trouble paying attention. | Never Rarely Sometimes Often Always |
| Mood and Emotions | In the past 7 days, | it was hard to adjust to unexpected changes. | Never Rarely Sometimes Often Always |
| Mood and Emotions | Please specify your level of agreement: | I feel good about myself. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Mood and Emotions | In the past 7 days, | many situations made me worry. | Never Rarely Sometimes Often Always |
| Mood and Emotions | Please specify your level of agreement: | When I'm stressed, I can't figure out what to do. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Mood and Emotions | In the past 7 days, | I suddenly became emotional for no reason. | Never Rarely Sometimes Often Always |
| Behavioral Control | Please specify your level of agreement: | I get very loud when I do not get what I want. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | I sometimes get physical when I'm angry. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | Sometimes I shout or yell for no reason. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | People know that I get angry easily. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | It's easy to do what people in authority ask me to do. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | Please specify your level of agreement: | I can't stop myself from doing the same thing over and over. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Behavioral Control | In the past 7 days, | I was stubborn with others. | Never Rarely Sometimes Often Always |
| Behavioral Control | In the past 7 days, | I was in conflict with others. | Never Rarely Sometimes Often Always |
| Behavioral Control | In the past 7 days, | I was resentful when I didn't get my way. | Never Rarely Sometimes Often Always |
| Behavioral Control | In the past 7 days, | I threatened violence toward people or property . | Never Rarely Sometimes Often Always |
| Behavioral Control | In the past 7 days, | I tried to get even when I was angry at someone. | Never Rarely Sometimes Often Always |
| Behavioral Control | In the past 7 days, | I held grudges toward others. | Never Rarely Sometimes Often Always |
| Behavioral Control | In the past 7 days, | I had trouble controlling my temper. | Never Rarely Sometimes Often Always |
| Behavioral Control | In the past 7 days, | people told me that I talked in a loud or excessive manner. | Never Rarely Sometimes Often Always |
| Behavioral Control | In the past 7 days, | I said or did things that other people probably thought were inappropriate. | Never Rarely Sometimes Often Always |
| Self Efficacy | Please specify your level of agreement: | I get along well with people outside my family. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self Efficacy | Please specify your level of agreement: | I feel people are against me. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self Efficacy | Please specify your level of agreement: | I feel that there are people I can turn to. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self Efficacy | Please specify your level of agreement: | I am good at making new friends. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self Efficacy | Please specify your level of agreement: | I can easily begin talking with others. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self Efficacy | Please specify your level of agreement: | I'm comfortable trying different ways to do things. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self Efficacy | Please specify your level of agreement: | Trying new things is fun. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self Efficacy | Please specify your level of agreement: | When I'm asked to do a really difficult task, I keep at it until I get it done. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self Efficacy | Please specify your level of agreement: | If I make a mistake, I know I can deal with it. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self Efficacy | Please specify your level of agreement: | I think people trust me. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self Efficacy | Please specify your level of agreement: | I look at both sides of an issue. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self Efficacy | Please specify your level of agreement: | I am willing to accept help from others. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self Efficacy | Please specify your level of agreement: | I am comfortable making eye contact with others. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self Efficacy | Please specify your level of agreement: | I like large family gatherings. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self Efficacy | Please specify your level of agreement: | Most people like what I have to say. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self Efficacy | Please specify your level of agreement: | I'm usually able to help solve other people's problems. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self Efficacy | Please specify your level of agreement: | I'm comfortable just seeing what the day brings. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self Efficacy | Please specify your level of agreement: | I look for the good in difficult situations. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self Efficacy | Please specify your level of agreement: | I learn from my mistakes. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self Efficacy | Please specify your level of agreement: | I believe that things end up alright most of the time. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self Efficacy | Please specify your level of agreement: | I respect other people's point of view. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self Efficacy | Please specify your level of agreement: | I can get back on track when I am distracted. | Strongly agree Agree Disagree Strongly disagree I don't know |
| Self Efficacy | Please specify your level of agreement: | People tell me I'm flexible and agreeable. | Strongly agree Agree Disagree Strongly disagree I don't know |